

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 26, 2006
Secretary of State**

DOCUMENT# 715309

Entity Name: LAKELAND RIFLE AND PISTOL CLUB, INC.

Current Principal Place of Business:

2000 LASSO LN
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

2000 LASSO LN
LAKELAND, FL 33801

New Mailing Address:

FEI Number: 59-2258200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHULTZ, RONALD D.
2000 LASSO LN
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: SHULTZ, LOIS
Address: 1827 TRISTAM
City-St-Zip: LAKELAND, FL 33813

Title: VDVP () Delete
Name: WATSON, GERALD
Address: 6236 CRANE DR
City-St-Zip: LAKELAND, FL 33809

Title: TD () Delete
Name: BROBECK, WAYNE
Address: 8683 SAN PAULO CRT
City-St-Zip: LAKELAND, FL 33813

Title: SD () Delete
Name: DRY, JIM
Address: 604 LAUREL DR
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOIS F SHULTZ

PS

01/26/2006

Electronic Signature of Signing Officer or Director

_____ Date